

Whitehill Neighbourhood Nursery Day Care of Children

Whitehill Neighbourhood Centre
9 Hunter Road
Whitehill
Hamilton
ML3 0LH

Telephone: 01698 476 586

Type of inspection:
Unannounced

Completed on:
17 March 2023

Service provided by:
Childcare in the Community a Scottish
Charitable Incorporated Organisation

Service provider number:
SP2017012912

Service no:
CS2017355821

About the service

Whitehill Neighbourhood Nursery is a day care of children service registered to provide care to a maximum of 25 children aged from birth to not yet attending primary school.

The service is located in Whitehill community centre in Hamilton and is close to shops, transport links, schools and other amenities. Children are cared for in a dedicated playroom with access to toilets and an enclosed rear garden.

About the inspection

This was an unannounced inspection which took place on 16 and 17 March 2023 between the hours of 09:30 and 16:45. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with children using the service and four of their family members;
- spoke with six staff and management;
- observed practice and daily life; and
- reviewed documents.

Key messages

- Children experienced kind and nurturing interactions, helping them to feel safe and loved.
- Staff responded to children's requests and interests which meant children felt valued.
- Lunchtimes could be improved to create a calmer, more nurturing experience for children.
- Most play experiences were child led and responsive to children's interests.
- Children were cared for in a safe and secure environment.
- Management needed to develop robust quality assurance systems to help ensure children experience a well-managed and well-led service.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing Care and Support.

All children were happy and settled in the environment. They experienced kind and warm interactions from staff, helping them to feel loved and secure. Parents commented positively on the care their child received and one parent said, "I feel they are safe and well looked after."

Children experienced support that met their needs. For example, children were able to sleep in response to their needs. Staff made sure this was a nurturing experience for children by offering cuddles, gentle singing and support. This made sure that children felt loved.

Staff knew children well and each child had a personal plan that contained important information to help meet their needs. To enable staff to learn about children when they started, an 'all about me' booklet was embedded in the setting and included relevant information to support the transition from home to nursery. One parent commented on their child's settling in period when starting, and said, "We also got an all about me pack which was nice and personal to ensure they were able to settle them quickly."

Snack times were a positive time of day for children, that supported their independence skills and social development. Staff sat with children and supported independence skills through self-serving. Children chatted with their peers, strengthening their social and language development. However, lunchtime experiences needed some improvements, to help ensure these were nurturing, calm and relaxing for children. The lunchtime routine was particularly busy and staff were not always sitting or engaging with children. This meant that there were missed opportunities to provide additional support for children who needed it (see area for improvement 1).

Quality indicator 1.3: Play and learning.

Children experienced a variety of play opportunities to support their learning. For example, playdough, outdoor play, sensory play and arts and crafts contributed to children's natural curiosity and language development. However, at times, adult led experiences reduced opportunities for children to develop their own ideas and thinking. Management agreed to review play experiences to ensure these supported children's learning and stimulated their natural curiosity and creativity.

Children had access to toys and materials that helped them to develop different concepts. For example, water play provided opportunities for filling and pouring and the construction area supported measurement and weight. Children were engaged in these for long periods of time with their peers helping to develop positive peer relationships. Children commented, "We are making chocolate castles", when playing in the soil.

Older children moved between the indoor and outdoor space with confidence supporting their choices and wishes. Whilst younger children did not have direct access to the garden, staff ensured they had regular opportunities for outdoor experiences and made best use of local green spaces. We discussed with

management the benefits of reviewing the materials available to outdoors. Access to more toys and materials would help to maximise children's play and learning. Management agreed to review this.

To help strengthen links within the local community, all children participated in forest adventures, park, walks and the local library. Parents commented positively on these experiences and one told us, "I know my daughter loves Wednesday for her woods walk and hot chocolate."

Tracking and monitoring systems were in place to support children to progress. Best practice documents were utilised to support staff to plan children's next steps. This helped secure progression in children's learning and development.

Areas for improvement

1. To support children's wellbeing, management should review the lunchtime experience. This should include, but is not limited to, developing opportunities to support children's independence skills, and ensuring children's needs are catered for.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible' (HSCS 1.35).

How good is our setting?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 2.2: High quality facilities.

The environment was bright, clean and well ventilated. Children's work and photographs were displayed around the space, giving a message to children that they mattered. Children had their own space in the cloakroom to store their personal items and meant children felt a sense of belonging. One child told us, "Look at my picture. I am going to put it in my bag, come and I will show you"; and "This is my peg, and look over here, this my baby brothers peg."

Children moved around the space with confidence, supporting their choices of where to play. Toys and materials were easily accessed by children and opportunities for children to move these around the playroom supported their learning. Parents told us their children had, "Many play experiences offered and every day is a school day for them, they are learning so much."

Plans were in place for developments of the outdoor space to offer further experiences for children. We suggested some small changes to the indoor environment to maximise opportunities for children. For example, repositioning the cosy area to help promote relaxation and emotional development through calm, quiet spaces. Management agreed with this and planned to review.

A system for reporting accidents and incidents was in place and these were audited to help ensure a safe environment for children. We discussed developing the audit system to ensure it was thorough. This would help to make children safer by preventing repetition of accidents. Before the inspection was complete, management had made these changes. Most parents told us they were informed of any accidents; however,

some parents mentioned this could be better. We shared this with management who agreed to consider communication of these.

Effective infection prevention and control measures were in place. The cleaning of surfaces, regular handwashing and use of gloves, aprons and a wipeable mat helped reduce the spread of potential infection.

How good is our leadership?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 3.1: Quality assurance and improvements are led well.

Some self-evaluation had been carried out to help identify strengths and any areas for improvement. This included staff questionnaires as well as gathering parents' views. The service responded to these with next steps to support improvements. Parents commented positively on changes being made; one said, "The Facebook page keeps us informed of any changes to service or events coming up."

An improvement plan was in place and highlighted areas for development. We discussed the benefits of providing leadership roles within the team to empower staff to take the lead and be involved in the improvement journey. Informal monitoring of staff practice and experiences took place. A more formal approach should now be adopted to help lead to sustained improvements. At the last inspection, an area for improvement was made around quality assurance, and this had been partially met. We have rewritten this to reflect the improvements still needed in the service (see area for improvement 1).

Team meetings took place from time to time, which provided opportunities for sharing of important information and ideas. However, the service should consider the frequency of these meetings to help ensure these are regular and meaningful.

Areas for improvement

1. To help ensure children experience a service that is well-managed and well-led, management should ensure robust quality assurance systems are in place. This should include, but is not limited to, formal monitoring of staff practice and audit systems to identify any gaps and actions needed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

How good is our staff team?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 4.3: Staff deployment.

Staff worked well as a team and communicated throughout the day. They told us they were happy at their work and felt supported and included in any changes and improvement planning. This meant that staff were comfortable to share their ideas and felt valued. A flexible staffing model helped to ensure staff absences were covered. Children were familiar with all staff which contributed to children experiencing continuity of care. Parents commented, "I personally really love the nursery and the staff."

There were enough staff to meet the needs of children. During core times of the day, staff were deployed well to support children. They supervised and engaged well with children, responding to their requests. However, at busier times of the day, staff were particularly task focused and this meant there were missed opportunities for high quality interactions and engagement; for example, at lunchtime.

Staff appraisals were in place to support staff. Some staff told us about the areas they led on; however, management could consider further developing champion roles/mentoring roles that would help contribute to a sense of empowerment and achievement for staff. This would link with the service's improvement plan and help to support developments of the service.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

It is a requirement that each child has a personal plan put in place within 28 days of them starting the service. This plan must set out how staff will meet the child's health, welfare and safety needs. The personal plans in place should be developed to ensure they meet this requirement. Information about each child should be connected (personal plans, observations and online journals, planning) and should flow between these documents to clearly reflect how staff had supported the child to meet any next steps agreed with parents/carers.

This is to ensure care and support is consistent with the health and Social Care Standards which state that "My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices."

This area for improvement was made on 15 October 2018.

Action taken since then

Personal plans were reviewed and these contained important information to help staff meet children's needs. All information on children linked well and clear tracking of children's needs, progress and development was clear. Families had reviewed these and had agreed to the next steps suggested by the setting. Therefore, this area for improvement is met.

Previous area for improvement 2

Monitoring and auditing systems should include checking that all records were linked. For example, personal plans should be connected to parent input, staff training could be connected to room monitoring visits, and reviews of risk assessments could be linked to accident or incidents in the service. This would clarify the reason for any action. The service could use the Scottish Government model for improvement to set aims, establish measures, select change, and test change, or Plan, Do, Study, Act.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that, "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes."

This area for improvement was made on 15 October 2018.

Action taken since then

The service had ensured that children's documents were linked and parents were involved with this. For those areas that have not been met, a new area for improvement has been written under key question 3.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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